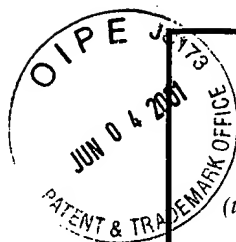


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PTO/SB/021 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/769,036
		Filing Date	January 24, 2001
		First Named Inventor	Bea Calo
		Group Art Unit	2164
		Examiner Name	
Total Number of Pages in This Submission	24	Attorney Docket Number	1991-00301

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment (for an application) <input checked="" type="checkbox"/> Drawing(s) Substitute (18 sheets Figs. 1-11B) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Notice to File Missing Parts of Nonprovisional; and Application; Declarations (2)
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

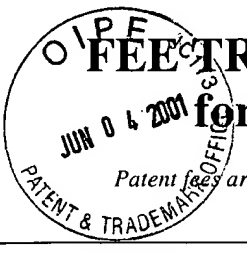
Firm or Individual Name	ROBERT M. GRAY
Signature	
Date	June 1, 2001

CERTIFICATE OF MAILING

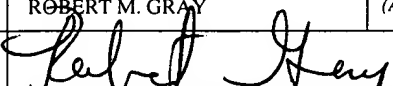
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: June 1, 2001			
Typed or Printed Name	M. A. CRABTREE		
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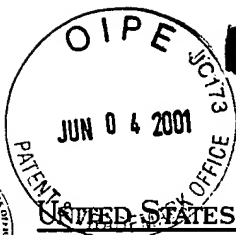
 <p>FEE TRANSMITTAL for FY 2001</p> <p>Patent fees are subject to annual revision.</p>		Complete if Known	
		Application Number	09/769,036
		Filing Date	January 24, 2001
		First Named Inventor	Bea Calo
		Examiner Name	
		Group Art Unit	2164
TOTAL AMOUNT OF PAYMENT		\$ 130.00	
Attorney Docket No.		1991-00301	

<p style="text-align: center;">METHOD OF PAYMENT</p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to: Deposit Account Number: 03-2769 Deposit Account Name: Conley, Rose & Tayon, P.C. <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other Order</p> <p style="text-align: center;">FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee (\$)</th> <th>Fee Code (\$)</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>710</td> <td>201</td> <td>355</td> <td>Utility filing fee</td> <td>\$</td> </tr> <tr> <td>106</td> <td>320</td> <td>206</td> <td>160</td> <td>Design filing fee</td> <td>\$</td> </tr> <tr> <td>107</td> <td>490</td> <td>207</td> <td>245</td> <td>Plant filing fee</td> <td>\$</td> </tr> <tr> <td>108</td> <td>710</td> <td>208</td> <td>355</td> <td>Reissue filing fee</td> <td>\$</td> </tr> <tr> <td>114</td> <td>150</td> <td>214</td> <td>75</td> <td>Provisional filing fee</td> <td>\$</td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td>\$</td> </tr> </tbody> </table> <p>2. EXTRA CLAIM FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th colspan="2">Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>*</td> <td>- 20**</td> <td>= * x</td> <td>18.00</td> <td>= \$</td> </tr> <tr> <td>Independent Claims</td> <td>*</td> <td>3**</td> <td>= * x</td> <td>80.00</td> <td>= \$</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td>270.00</td> <td>= \$ 00.00</td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee (\$)</th> <th>Fee Code (\$)</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> </tr> <tr> <td>102</td> <td>80</td> <td>202</td> <td>40</td> <td>Independent Claims in excess of 3</td> </tr> <tr> <td>104</td> <td>270</td> <td>204</td> <td>135</td> <td>Multiple dependent claim, if not paid</td> </tr> <tr> <td>109</td> <td>80</td> <td>209</td> <td>40</td> <td>** Reissue independent claims over original patent</td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> <td>\$</td> </tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see above</p>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)	101	710	201	355	Utility filing fee	\$	106	320	206	160	Design filing fee	\$	107	490	207	245	Plant filing fee	\$	108	710	208	355	Reissue filing fee	\$	114	150	214	75	Provisional filing fee	\$	SUBTOTAL (1)					\$			Extra Claims		Fee from below	Fee Paid	Total Claims	*	- 20**	= * x	18.00	= \$	Independent Claims	*	3**	= * x	80.00	= \$	Multiple Dependent				270.00	= \$ 00.00	Large Entity		Small Entity		Fee Description	Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)	103	18	203	9	Claims in excess of 20	102	80	202	40	Independent Claims in excess of 3	104	270	204	135	Multiple dependent claim, if not paid	109	80	209	40	** Reissue independent claims over original patent	110	18	210	9	** Reissue claims in excess of 20 and over original patent	SUBTOTAL (2)					\$	<p>3. 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149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	\$																																																																																																																																																																																																																																																																																																														
179	710	279	355	Request for Continued Examination (RCE)	\$																																																																																																																																																																																																																																																																																																														
169	900	169	900	Request for expedited examination of a design application	\$																																																																																																																																																																																																																																																																																																														
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SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	ROBERT M. GRAY	Registration No. (Attorney/Agent)	41,798	Telephone	(713) 238-8000
Signature				Date	June 1, 2001

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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/769,036	01/24/2001	Bea Calo	1991-00301

CONFIRMATION NO. 5934

FORMALITIES LETTER



OC000000005939418

ROBERT GRAY
CONLEY, ROSE & TAYON, P.C.
P.O. Box 3267
Houston, TX 77253-3267

RECEIVED

APR 10 2001

Date Mailed: 04/05/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 130.**

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
 - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

*A copy of this notice **MUST** be returned with the reply.*

06/06/2001 HMOHAMM1 00000061 032769 09769036

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PART 2 - COPY TO BE RETURNED WITH RESPONSE